

Quick Updates

Nursing & Patient Care Services

October 15, 2004

Follow Me to the CRC

This is the 1st in a series of communiqués about our planned move to the Mark O. Hatfield Clinical Research Center (CRC). Additional information sources include your PCU's Move Coordinator, Clinical Educator, Nurse Manager, and the CRC Website (<http://www.cc.nih.gov/cc/crc/>).

Two groups have met regularly for at least 15 months, planning a smooth move to the CRC on December 4th. The **CRC Relocation Task Force** is responsible for developing the overall move plan and all clinical departments moving to the CRC have been represented on this Task Force, e.g., Pharmacy, DLM, DTM, CHS, etc. The **N&PCS Transition Team** is responsible for planning the safe and efficient moving of all patients and nursing staff. Members of the N&PCS Transition Team are:

Lisa Marunycz, Team Leader	Toni Jones-Wells	Anita Marban
Laura Chisholm	Gigi Kuberski	Helen Mayberry
Barbara Corey	Pam Koviack	Sandra Phelps
Ginnie Daine	Ann Marie Matlock	Lori Purdie
Cheryl Fisher		Sheria Washington

CRC Tours — General and Group Orientation Tours are now available and interested individuals or groups can sign up by emailing hatfieldtours@cc.nih.gov. You will receive confirmation of your scheduled tour.

- **General Tours** are held daily at 11 a.m. and 2 p.m. and take about one hour. The General Tour provides an overview of the CRC layout with basic tips to find your way and include visits to PCU's, labs, and public amenities.
- **Group Tours** (departments, PCU's) are held Mon. — Fri. at 9 a.m. and take about 90 minutes. In addition to a *General Tour*, a visit to your assigned area is included. Please include the number of people you want to have included in the *Group Tour*.

Scheduled Move Days:

- Many Institute Labs and Institute Clinical Directors' Offices are moving now and should complete by the 1st week in Nov.
- The CC's 2nd Floor Suite including the Office of the Director and Clare Hastings is scheduled to move the week of Oct. 18th.
- Admissions, Voucher and Travel offices will move week of 11/15.
- Offices currently located on PCUs will move the week of 11/15. and will reside in the CRC prior to the patient move day.
- Patient Move Day is December 4, 2004! All patients, nursing staff, and clinical equipment and furniture will be moved by professional movers. The 1st patient will move at ~ 0830 and we anticipate the move will be completed by 1200.

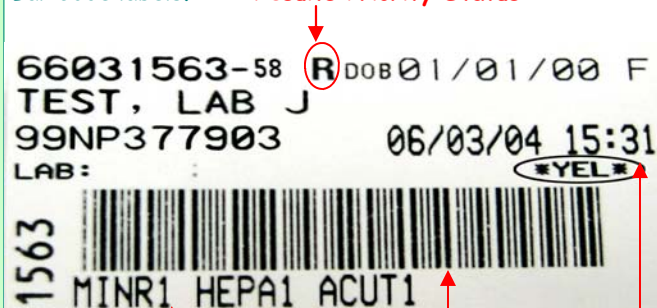
Past issues of **Quick Updates** are posted at <http://intranet.cc.nih.gov/nursing/jcaho/quickupdates.html>.

Email your comments, suggestions, and questions to the **QU** editors at CC-NURS QU Editor.

CRIS Hot Spots

Interpreting a Bar Code Label

You have asked for definitions of the codes displayed on Bar Code labels.



Test Name **Bar Code** **Tube Type**

Result Priority Status indicates specimen's reporting priority (R=Routine, U=Priority/Urgent, or S=STAT)

Test Name indicates tests required for this tube or container. Due to space, list of test names appearing on the label may not be complete as multiple tests can be performed from one tube. If you're not sure you have all your Bar Code labels, please validate lab orders via CRIS on-line or the Order Requisition.

Bar Code contains all pt demographics and ordered lab tests.

Tube Type indicates tube needed for blood draw. If two tubes are required, two labels will print out. For children, if appropriate, additional tests can be combined in 1 tube, as usual.

Here are 2 additional resources that might help:

1. CRIS Process Poster entitled, "Laboratory Specimen Collection . . . Change as of 10/4/2004 (http://intranet.cc.nih.gov/nursing/WhatsNew/Nursing_Process_for_CRIS.html).
2. DLM Website (<http://intranet.cc.nih.gov/dlm/>). At this site, select "*Master Test Guide*" and search by the test name (e.g., MINR1, HEP A1, ACUT1) or, by the tube type (e.g., YEL). The search engine will direct the web browser to a list of tests that match your criteria. When you select the desired test, you are provided with detailed information including a picture of the tube, collection instructions, etc. The *Master Test Guide* is automatically updated when a new test is added to the website or a change is made.

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Web Updates

The Medical Executive Committee's web pages, including the Medical Administrative Series (MAS), have received a facelift . . . check it out! The MAS search engine is no longer case-sensitive and, a summary document of recent changes is available. If you have additional suggestions for enhancing this site, please call Natascha Pointer (301-402-2434). We want this site to serve its users. Here's the link from the NPCCS Intranet: <http://intranet.cc.nih.gov/mec/mas/>.

CC Nurses Out and About

Welcome to our newest NPCCS members

The following staff joined us

July — October 2004

NPCCS Leadership:

Amy Chi, Nurse Manager, 7E, 11E, & 11W

Madeleine Cooper, Nurse Recruiter

Lori Cordova, Nurse Manager, OP8 & OP11

Sandra Phelps, Central Educator
Nonniekaye Shelburne, CNS

Office of Research and Outcomes Management

Sandra Mitchell

Nigdalia Rivera-Goba

Clinical Research Nurses

2 East

Danielle Engstrom

Keith Marin

Linda O'Mara

Donna Sodee

Joan Templeton

2 West / BMT

Deborah Fairall

Selena Goodlin

April James

Marlene Peters-Lawrence

Gloria Shuler

Kia Taylor

Kimberly Walker

2J/SICU and 10D ICU

Aldrin Jaranilla

Sean McMahan

Mara Vecchio

Florencia Wilson

3 East

Rebecca Gorham

Thomas Houston

3 West

Stephen Gough

5 West

Monica Boateng

Kaylan Fenton

Alexander Ober

7 East, 11 East, & 11 West

Laura Heytens

Susan Jordon

Eric Thornton

Doris Wurah

8 East and 8 West

Marie Cadet

Elena Chico

Gia Lawrence

Frances McCarey

Jami Reese

Kattie Sankoh

Charmika Schuster

9 West

Stacey Barley

Tamara Davis

Nicole Plass

Towana Tibbs

12 East

Juliet Chikere

Nicole Droog

Diana Johnson

Annemarie Seales

Christina Walker

13 East/OCC

Carol Chandler

Anita Chilcoat

13 West

Rachael Mabyou

Anne Marie Spletzer

OP8

Manuel Del Rio Plaza

Venetia Thompson

OP11

Melanie Michel

OP13

Rebecca Babb

Central Staffing Office

Elfrieda Allen

Michelle Heslop

Leigh Price

Laurie Williams

CRIS Hot Spots (Continued from page 1)

OR Schedule — The OR Schedule is still posted in MIS and should be consulted to learn "actual date/time" of your patient's scheduled surgery. The "OR/Anesthesia Request" and "Off-Site Anesthesia Request" communicate "requested time" only to the OR Front Desk and may be changed.

IV Documentation questions are being explored by DCRI. Stay tuned for further communication as we test possible solutions.

Sliding Scale Insulin — displaying the entire sliding scale insulin order in the Order Summary or the Meds Due List is under investigation by DCRI, Pharmacy, and NPCCS.

Identifying Hot Spots —

- If you need assistance using CRIS, please refer to the CRIS User Manual (online), problem-solve with a CRIS Super User, or call the CRIS Support Center (301-496-8400).
- If you discover an unanticipated problem in CRIS (incomplete printouts, missing or duplicate orders, missing items on Work List), in addition to getting help, please complete an ORS.

Pharmacy Updates

Potassium Phosphate

In July 2004, the P&T Committee approved "Potassium Phosphate (KPhos) Infusion Guidelines." You can locate these Guidelines under the Pharmacy's Formulary link from the CC desktop (<http://internal.cc.nih.gov/formulary/ccfs/intraven.htm>). Scroll down to "Metabolic Disorders and then, "Electrolyte Replacement."

Anaphylaxis Drug Bins and Solu-Cortef®

There have been intermittent shortages of hydrocortisone in the 100mg Mix-O-Vial (drug and diluent in one vial). Over the past several months, the Pharmacy has had no choice but to procure the 100mg hydrocortisone in vials containing dry powder only. Your anaphylaxis drug bins should contain hydrocortisone sodium succinate (Solu-Cortef®) 100 mg vials. When dispensing the powder-only vials, Pharmacy will also dispense a 10mL bacteriostatic water vial and reconstitution directions. The hydrocortisone, diluent, and directions will be placed in a zip-lock bag and labeled:

Hydrocortisone 100 mg vial

Prepare solution by aseptically adding 2 ml

Bacteriostatic Water for Injection to the vial
resulting in 50mg/ml concentration; gently agitate

Store at room temperature; Protect from Light

Discard after 72 hours

During the next PCU inspections, pharmacists will ensure that the anaphylaxis drug bin contains either the hydrocortisone Mix-O-Vial or the hydrocortisone powder-only kit containing the diluent and directions.